	PATI	ENT APPLIC	ATION	FEE DETEI te for Form PTC	RMINATION	o a collection of info		Applicat	ou or nockeriyn	8 3
CLAIMS AS FILED – PART I (Column 1) (Column 2)						SMALL ENTITY		OTHER THAN OR SMALL ENTITY		
FOR NUMBER FILED		NUMBER EXTRA		RATE	FEE		RATE	FEE		
ASIC FEE 37 CFR 1.16(a))		21	21				385,66	OR		<u>סרר</u> ₃
OTAL CLAIMS 37 CFR 1.16(c))		21	2 minus 20 =			× \$ Q =		OR	=_ <u>&1</u> _{2 ×}	
NDEPENDENT CLAIMS 37 CFR 1.16(b))		1S 8	minus 3			× \$ 43 =	,	OR	× \$ <u>8</u> C =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))				+ \$ 145 =		OR	+ \$ 290 =			
If the difference in column 1 is less than zero, enter "0" in column 2.					TOTAL		OR	TOTAL	121.	
		AIMS AS AM				•		•		
	Cl	AIMS AS AMI	ENDED	- PARTII				OR	OTHER	R THAN
		(Column 1)	1	(Column 2)	(Column 3)	SMALL E	NTITY	1	SMALL	ENTITY
۲ ا		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMEN	Total (37 CFR 1.16(c))	· <i>t</i>	Minus	" /	=	× \$=		OR	X \$=	
Z Z	Independent (37 CFR 1.16(b))	· s	Minus	··· 5	= /	x \$=		OR	x \$=	
₹	FIRST PRESENT	ATION OF MULTIPL	E DEPEND	ENT CLAIM (37 CF	R 1.16(d))	+ \$=	/	OR	+ \$=	/
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
-		(Column 1)		(Column 2)	(Column 3)	•				
n N		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENI	Total (37 CFR 1.16(c))	*	Minus	**	=	x \$=		OR	x s=	
EN	Independent (37 CFR 1.16(b))	*	Minus	***	=	x \$=		OR	x \$=	
≥	FIRST PRESENT	ATION OF MULTIPL	E DEPENDI	ENT CLAIM (37 CF	R 1.16(d))	+s =		OR	+\$ =	
⋖					· .	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
∢_		(Column 1)		(Column 2)	(Column 3)					
▼		CLAIMS REMAINING		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAI FEE
<u>۔</u> ن		AFTER AMENDMENT	1 .		=	1		OR	x \$ =	
<u>۔</u> د	Total (37 CFR 1.16(c))	AFTER	Minus			X \$=		, on		
<u>۔</u> د		AFTER	Minus	***	=	x \$= x \$=	 	OR	x \$=	
AMENDMENT C A	(37 CFR 1.16(c)) Independent (37 CFR 1.16(b))	AFTER AMENDMENT	Minus	***	=			1		

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 2, enter 20.
"If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.